

## CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20	1					
21		1				
22		1				
23	1					
24		1				
25		1				
26		1				
27		1				
28		1				
29		1				
30		1				
31		1				
32		1				
33	1					
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36		1				
37		1				
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42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	3					
Total Depend	15					
Total Claims	18					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
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59						
60						
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100						
Total Indep						
Total Depend						
Total Claims						